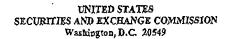
FORM D

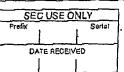
03038381



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

10504.						
OMB APP						
OMB Number:	3235-0076					
Expires:	May 31, 2005					
Estimated avera	ige burden					
hours par respon	nse,16.00					



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Angus Energy Corp.	FCCE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	O D OF DESCRIPTION OF THE OFFI
Type of Filing:	. 0 0000
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	THOMSON
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	FINANCIAL
Angus Energy Corp. Address of Executive Offices (Number and Street, City, State, Zip Code)	
	Telephone Number (Including Area Code)
222 W. Las Colinas Blv.; Irving TX 75039	(972) <u>-501</u> -1479
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	Nº //
Oil & Gas Exploration	PECEIVED TO
Type of Business Organization	Mou
corporation limited partnership, already formed other (p business trust limited partnership, to be formed	lease specify):
Month Year	
Actual or Estimated Date of Incorporation or Organization:	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	ND.
GENERAL INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SBC at the address given below or, if received at that address after the date on which it is due, on the date it was malled by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SBC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

_	AT	re)	ITI	n	N
_	M .			ш	

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

2. Enter the information requested for the following:	
Buch promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the j	ssue
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Nelson, Brent Business or Residence Address (Number and Street, City, State, Zip Code)	
10900 NE 8th Street, Suite 900, Bellevue, WA 98004	
Check Box(e3) that Apply: Promoter Beneficial Owner Bexecutive Officer Director General and/or Managing Partner	_
Pull Name (Last name first, if individual)	
Business of Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Bexecutive Officer Director General and/or Managing Partoer	
Full Name (Last pame first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(cs) that Apply: Promoter Beneficial Owner Bexecutive Officer Director General and/or Managing Partner	==-
Full Name (Last name first, if individual)	
Business of Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business of Residence Address (Number and Street, City, State, Zip Code)	
Check Bax(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	~
Full Name (Last name first, if Individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
ull Name (Last name first, if individual)	-
Fusiness or Residence Address (Number and Street, City, State, Zip Code)	~

					#	писни	ATHOX AN	OL LOTE	RING .				
						- 11 .		41				Yes	No
1.	Has th	os rsucei s	ld, or does										Ŕ
•	37 rt a 3	. 46	•				•	n 2, if filin	_			۴	
2.	w nat i	s the mini	mum mves	ment mar	WIII be ac	ceptea no	ш вту пиот.	v1du81/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			 Yes	0 ,000 %
3.	Does t	he offering	, permit jo	int owners	hip of a si	ngle unit?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		he inform										my	
		ssion or sir son to be li											•
(or state	s, list the r	ame of the	broker or	dealer. If r	nore than f	ive (5) pers	sons to be li	sted are as				
		or dealer			he informa	ation for th	at broker o	or dealer on	dy.				
Full	Name (Last name	first, if in	dividusi)									
Busin	1038 Or	Residence	Address (Number a	d Street,	City, State,	Zip Code)					······································
Name	of As	ociated B	roker or D	caler				·					
States	in W	ich Person	Listed Ha	s Solicite	or Intend	ls to Solici	t Purchase	rs					
(Check	"All State:	or check	individus	l States)	***************************************	**************	***************************************		*******************		🛮 А	II States
[2	AL	AK	ΑZ	AR	CA	[CO]	CT	DE)	DC	FL	GA	Ħ	
7	IL.	M	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	VI.	NE	NV	NH	NI	MM	NY	NC	ND	OH	ŎK)	OR	PA
	ŔĬ	SC	SD	IN	IX	UI	VT	VA	WA	WV	WI	WY	PR
Pull N	ame (I	ast name	first, if ind	ividual)									
Busine	ss or	Residence	Address (Number ar	d Street, C	City, State,	Zip Code)						
		17	 										
Name	OI A85	ociated Br	oker or De	ajer									
States	in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasere	;					
(C	heck "	'All States'	or check	individual	States)		***********		************			. 🔲 All	l States
ΓĀ	I	(AK)	ΑZ	AR	CA	CO	CT	DB	DC	FL	GA	H	DD
		X	IA	KS	ΚY	LA	ME	MD	MA	MI	MN	MS	MO
M	T	NE	NV	NH	NI	NM	NY	NC	ИD	OH	OK	OR	PA
R		SC	SID	IN	TX	UT	YT	VA	WA	WV.	WI	WY	PR
Pull Na	me (L	ast name fi	rst, if indi	vidual)									
													,
Busines	ss or E	Residence	Address (N	lumber and	l Street, C	ity, State, I	Zip Code)						
Vame o	f Asso	ciated Bro	ker or Dea	ler									
States in	n Whi	ch Person I	isted Has	Solicited	or Intende	to Solicit I	urchasers						
(Cł	neck",	All States"	or check i	ndividual	States)		***************************************			************	************	[] All	States
AI		ĀK	AZ	AR	CA	CO	CÎ	DE	DC	FL	GA	Ħ	
Œ.	_	(M)	IA	KS	KY SW	LA	ME	MD	MA	MI	MN	MS	MO
M. RI	_	NB SC	NV SD	NH TN	IX IX	MM TT	NY IVI	(NC) (VA)	ND WA	OH) WV	OK) WI	OR WY	PA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount stready sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security Common Preferred Partnership Interests \$ Other (Specify _______ \$_____\$ Answer also in Appendix, Column 3, if filing under ULOB. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors..... 12 ' 23,000,000 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I. Type of . Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Pees \$23,500 Accounting Fees Engineering Pees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total

b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	— Question 4.a. This difference is the "adju	sted gross	\$ -2,975,00 (
 Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The tota proceeds to the issuer set forth in response to F 	any purpose is not known, furnish an est lof the payments listed must equal the adju	imate and	
		Payments of Officers, Directors, Affiliates	
Salaries and fees			□\$
Purchase of real estate			
Purchase, rental or leasing and installation of m	nachinery		
and equipment			_
Construction or leasing of plant buildings and f	acilities	\$	
Acquisition of other businesses (including the voffering that may be used in exchange for the as	esets or securities of another .	□ ¢	□ ¢
issuer pursuant to a merger)		-	-
Working capital			
Other (specify): Acquistion of o			
ف المسيد بديدة المسلم	to anaine maint 651	$2.00\overline{0}$	
completion cost	for drilling well \$	382,000	_ []\$894_000
Column Totals			
Total Payments Listed (column totals added) ,		s_	2,975, 000
	D REDERAL STANSTURE		
he issuer has duly caused this notice to be signed by th gnature constitutes an undertaking by the issuer to fu e information furnished by the issuer to any non-act	unish to the U.S. Securities and Exchange	Commission, upon writ	tule 505, the following ten request of its staff,
suer (Print or Type)	Signature Q ()	Date	
Angus Energy Corp.		October	10, 2003
me of Signer (Print or Type)	Title of Signer (Print or Type)		
Brent Nelson	President	•	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)